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UNITED STATES PUBLIC HEALTH SERVICE,  
*El Paso, Tex., January 24, 1917.*

*To transportation companies and others concerned:*

Effective this date no Mexicans of the laboring class or their families are to be furnished transportation from El Paso to any other point in the United States unless they present, at the time the transportation is requested, a certificate from the United States Public Health Service similar to the one attached hereto. This certificate must be signed by the officer in charge at El Paso, and be dated not more than 24 hours prior to the time of presentation.

Further, no baggage belonging to persons of the class above mentioned shall be checked or allowed to be taken into any car unless it bears a certificate of disinfection similar to the card attached hereto.

An inspector of the United States Public Health Service will be stationed at the Union Depot to assist in enforcing this restriction, and those furnishing transportation should refer to this inspector persons that require certificates so that he may direct them to the disinfecting plant.

These certificates need not be taken up by the transportation companies from authorized labor agencies using party tickets or passes for laborers, as the employment agents will be responsible for persons shipped by them. All other Mexicans that buy their own tickets will have their certificates taken up by the transportation company, and such certificates are to be returned to the United States Public Health Service each day in envelopes to be provided for that purpose.

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## INTERSTATE SANITARY RELATIONS.<sup>1</sup>

By W. C. RUCKER, Assistant Surgeon General, United States Public Health Service.

Increase in population and ease of travel in the United States have vastly changed the sanitary relations existing between the States since the formation of our Government. Originally a sparsely populated fringe of colonies bordering the Atlantic coast, having no railroads and few highways, and depending for the most part upon slow sailing craft, we have become a Nation which extends from ocean to ocean, the component parts of which are in intimate relation with one another by swiftly moving trains and rapid steamships. The original isolation of the States has ceased to be and the integration of our national life has become such that insanitary conditions in one part of the Republic must inevitably exert an untoward effect upon almost the entire body politic. As the country has become more thickly populated there has occurred a pollution of the interstate streams which endangers the water supplies of other States. The invention of refrigerator cars and the introduction of intensive methods of farming, particularly of truck gardening, have made it possible for infection to be rapidly carried in a viable state for long distances, and modern transportation has made equally possible the rapid carriage of infected persons from State to State. It is thus seen that the interstate sanitary relations of the United States are

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<sup>1</sup> Read before the American Academy of Medicine, Detroit, Mich., June 10, 1916.

exceedingly complex, touching every stratum of life and bearing upon the health of every American inhabitant.

The United States has created a first line of defense against disease from abroad. This has taken the form of the maritime and overland foreign quarantine, and may be called our coast defenses against disease. So long as we continue to maintain our foreign quarantine on an efficient scientific basis we have relatively little to fear from the importation of disease from other countries. As witness of the efficiency of the system may be cited the fact that no case of yellow fever has occurred in the United States since 1905; that despite the fact that cholera was widespread in epidemic form in many parts of Europe in 1910 it gained no foothold in the United States; and that whenever plague has appeared in an American seaport it has been speedily stamped out before it has had an opportunity for further spread. As a matter of fact, it may be stated that so far as the major pestilences are concerned they have practically ceased to exist as regards the interior of our country, and that we are now free to devote ourselves to the conquest of those commoner and more familiar diseases which, in their end result, are a far greater menace to our national health. At the present time measles exerts a far more harmful influence on national health than does bubonic plague, and while there is always a certain danger of the importation of typhus fever by lousy persons who evade quarantine, still our ability to control this disease is such that we have little to fear from it. The great problem which concerns us is the control of disease by the States and the prevention of interstate spread by the Federal Government.

The constitutional right of the General Government to control disease rests entirely upon the commerce clause. The police powers of States being reserved to the States, the sanitary policy of our Government looks to the individual States to control disease within their respective borders and to the General Government to prevent the passage of disease over the borders of an infected State into another State. The line of demarkation between the sanitary duties of the States and those of the General Government is not and can not be sharply drawn. If the commerce clause may be invoked to prevent the interstate movement of manufactured articles produced by child labor within the borders of a sovereign State, it is seen that it would be equally proper for the General Government to prevent the interstate movement of foodstuffs manufactured under insanitary conditions within the borders of a sovereign State.

The complexity of this problem is such that unless due care is observed there will be an enormous overlapping and reduplication in the sanitary work of the United States; and if the General Government were to go to the extreme of its power in the control of

commerce between the States there would be relatively little need for State departments of health. Carried still further, this argument would abolish municipal and county health authorities and place the entire operation of health matters upon the shoulders of the Federal Government. This would be a *reductio ad absurdum* entirely out of harmony with the principles upon which our Nation is founded. It would therefore follow that in the sanitary relations between the States there must be a unity of purpose on the part of the counties, districts, and cities of every State with the State officials and that all States must perform their functions with uniformity and with due regard to the Union of the States.

This principle was gradually evolved and it was not until 1893 that it assumed a definite form. The sanitary history of our Government shows a constant movement to this end. In the early days of the Republic the States were very jealous of their own rights and fearful lest the General Government should in any way interfere with the discharge of State functions. This was soon seen to be impractical in the administration of quarantine and a definite attempt was made in the Third Congress to relinquish that portion of the police power to the Federal Government. This attempt failed and until 1878 all quarantine measures adopted by the Nation as a whole were in aid of State health authorities. Then followed the period in which States operated maritime quarantines according to a minimum standard which was set by the national health authorities. In 1893 the Government not only assumed the right to set the minimum standard of maritime quarantine but to take charge of State quarantines and to operate them once they were transferred to the authorities at Washington. More than this, the act of February 15, 1893, definitely recognized the Government's duty not only in excluding disease from abroad but in preventing its spread from State to State.

Under this authority of law the interstate quarantine regulations have been promulgated. For the present these concern themselves with the regulation of common carriers for the protection of the health of passengers, for the safeguarding of persons living along the right of way, and for the handling of the communicable diseases so as to check so far as possible their interstate spread.

These regulations indirectly exert a tremendously beneficial effect upon national health. For example, common carriers carrying passengers in interstate traffic may not furnish to passengers drinking water below a certain standard. The sources of the water supplies are certified semiannually and oftener under certain circumstances. As a result many cities have improved their water supplies rather than have them discontinued for use on trains by Federal order. The abolition of the common drinking cup and the common roller

towel by these regulations also exerts a very salutary educational effect upon the public mind. Eventually the interstate quarantine regulations will take into account the interstate shipment of milk and other foods, but as yet the Government's health machinery is not large enough to attack this phase of the problem. In the interstate sanitary relations the work which may be carried on in this way is limitless and there are many things remaining which the National Health Service can and should do. In the doing of these things, however, the policy should be that of upbuilding and strengthening the State departments of health to the greatest possible degree. They should be encouraged and if necessary aided in the performance of their functions, but the General Government should assume none of the duties which properly belong to them and their sanitary rights should be scrupulously observed. So far as purely intrastate matters are concerned the governing principle should be that of sanitary home rule, while in interstate relations and the protection of all the States against the diseases of the outside world the Federal forces should be supreme.

It is not, however, practical for the States to control every situation or to grapple with every problem which arises within their borders. Economy demands that the overhead expert machinery be maintained by the States at a standard sufficient for ordinary needs and that in time of great stress the General Government be called upon for aid. The States maintain a militia for the preservation of peace within their jurisdiction, but in time of public danger the Army is requisitioned lest harm be done to other States. Similarly in time of grave epidemic the States very properly call upon the Public Health Service for its experts speedily to eradicate the disease before it can spread to other States. This is an economy and makes for efficiency in the protection of national health.

In the matter of research the Federal Government can and should render equal aid. To maintain 48 corps of field and laboratory workers would be a needless expense when one set of Federal experts could perform the duty. What is done for one State in this way profits all the States, and a single worker can make similar investigations of conditions within each of the States one after another. In the broader field of research the Federal Government very properly makes studies of diseases which are widespread and which therefore affect the health of many States. The results of this work are available to all the States. The collection of morbidity and mortality statistics primarily rests upon the States, but their assemblage into form which fits them for use is the duty of the General Government. In a similar way the publication of the results of scientific studies and the work of popularizing hygiene and sanitation are functions which

economy, efficiency, and expediency dictate should devolve on the Federal health body. For example, the stereopticon loan library of the Public Health Service is able to render excellent aid to health lectures throughout the Nation, while the Health News reaches 1,500 newspapers and millions of readers.

To sum up, there are certain clearly defined functions which must be discharged by State and local health authorities. Equally there are definite duties devolving upon the Federal Government. Between these two there is a zone in which either may do the work, separately or in cooperation. To accomplish this properly there must be a harmony and unison of purpose to the end that the health of the Nation may prosper.